

## COMBINED DECLARATION FOR PATENT APPLICATION AND POWER OF ATTORNEY

Page 1 of 2

|  |  |  |  |   | , ago , o, z  |
|--|--|--|--|---|---|
|  |  |  | 0  | 3-0049/013573   | (BOE 0447 PUS)  |
|  |  |  |  |   | <ul><li>☑ Original</li><li>☐ Continuation</li><li>☐ Division</li><li>☐ Continuation-in-part</li></ul> |
| As a below na  | med invento  | or, I hereby declare that:   |  |   | ☐ Supplemental  |
| My residence,  | post office  | address and citizenship are as st  | ated below next to n   | ny name.  |   |
| I believe I am<br>inventor (if plu<br>sought on the                | ural names   | l, first and sole inventor (if only of are listed below) of the subject titled   | one name is listed b<br>t matter which is c  | elow) or an orig<br>laimed and for  | ginal, first and joint which a patent is  |
|  | METHOD   | AND HYBRID SYSTEM FOR AU   | THENTICATING CO  | OMMUNICATIO   | NS  |
| the specification  | on of which  |  |  |   |   |
| (check one)  | $\boxtimes$  | is attached hereto.  |  |   |   |
|  |  | was filed on<br>[other than supplemental] was<br>through   | amended on or (b)  | Serial No<br>[supplemental]   | and (a) with amendments   |
|  |  | reviewed and understand the copy an amendment referred to above  |  | e identified spe  | cification, including   |
|  |  | o disclose to the United States F<br>stability as defined in Title 37, Cod   |  |   | ormation known to   |
| patent or inve   | ntor's certifi   | ority benefits under Title 35, Unit<br>cate listed below and have also<br>g a filing date before that of the a   | identified below an  | y foreign applic  | ation for patent or   |
| Prior Foreign A  | Application(   | s)   |  |   |   |
| NO.  | ONE  |  |  |   | rlority Claimed<br>]Yes  □ No   |
| Nu   | imber  | Country  | Day/Month/Year Filed   | d   |   |
| below and, ins<br>United States<br>acknowledge to<br>to be materia | sofar as the application the duty to continuous the following the follow | t under Title 35, United States of subject matter of each of the of in the manner provided by the fluisclose to the United States Pate ability as defined in Title 37, or go date of the prior application a | claims of this applic<br>irst paragraph of Tit<br>ent and Trademark<br>Code of Federal R | ation is not dis<br>le 35, United S<br>Office all inform<br>egulations, §1. | closed in the prior<br>tates Code §112, I<br>lation known to me<br>56 which became                    |
| Application Serial   | No.  | Filing Date  |  | Status<br>(patented, pend   | ling, abandoned   |

I hereby appoint the following attorneys, or agent and attorneys, to prosecute this application and to transact all business in the Patent and Trademark Office connected therewith:

| 27,880 |
|--------|
| 27,798 |
| 28,533 |
| 26,584 |
| 32,232 |
| 26,672 |
| 44,082 |
| 33,530 |
| 28,147 |
| 34,684 |
| 25,824 |
| 36,431 |
| 38,049 |
| 40,783 |
| 41,647 |
| 44,660 |
| 41,823 |
| 47,909 |
| 50,579 |
|        |

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I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under Section 1001 of Title 18 of the United States Code and that such false statements may jeopardize the validity of the application or any patent issued thereon.

| FULL NAME OF SOLE OR JOINT INVENTOR          | INVENTOR'S SIGNATURE |               | DATE |  |  |  |  |
|--|----------------------|---------------|------|--|--|--|--|
| Troy Rockwood                                |                      |               |      |  |  |  |  |
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| POST OFFICE ADDRESS                          |                      |               |      |  |  |  |  |
| Same as residence                            |                      |               |      |  |  |  |  |
| FULL NAME OF SOLE OR JOINT INVENTOR          | INVENTOR'S SIGNATURE |               | DATE |  |  |  |  |
| Bong Kyu Ryu                                 |                      |               |      |  |  |  |  |
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